

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X660

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishm	ent Name			Telephone Number	Date of Ins (mm/dd/yr		ID#
Leve	UP 1	Bal	en	() Establishment	' <i>i</i> '		18-270
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	(502)Q45=970Z	5/4	6/19	18-370
1001 V	inune	5 5	5t. (Suite 100) New Albany, 1H 47150	412 //		-	
Owner			•	Purpose:	Follow-u	p Releas	se Date
Amber	Wheeler	/L	ive Up Bakey, 114	1. Routine	NO TODAY		
Owner's A	idress	•		2. Follow-up	Summary of Violations:		
				3. Complaint			<u>ا</u>
Person in C	harge			4. Pre-Operational	C	NC_4	2 R(V)
Amber	Whe	W		_		. 1,0 <u> </u>	
Responsible				5. Temporary	Menu Typ	oe (See back	of page)
thelev	ulup l	na K	cylin@gmoil.com	6. HACCP			
Certified F	ood Handi	er_	/ - /- /- / \	7. Other (list)	12	<u>Х</u> з	_45
AMbe	· Whe	<u>ulu</u>	(3/3/24)				
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative				orrected By
438	C		A	11	. 1	- 4	
			Observed (3) chunical sprayers lacks	ng common have the	re j	100	PR7
239	NC	ļ	Observed recently used bread pans	stored almostile	clus	Corre	cte2
			pans on BOH dish rack				
			-pans left to "scason" should b	e wiped class			
430	NC		Observed missing willing tile in Box	l last/has	·	1 101	:ek
الالا	NC		Coperate Personal Color International	L MAI MY		1 24.	
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Received by	y (name and	l title	printed):	Inspected by (name and title printed):			
I Am	hor	(1)	theeler	A.). Ingram (EHS)			
Received by				Inspected by (signature):			
	0 M	1	100	ay .			
cc:	c. / - !		CC;	<u> </u>	cc;		<u></u>